

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6-11-08</u>		2 Serial/Patent # <u>9/498363</u>									
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
<input type="checkbox"/> Filing			\$								
<input type="checkbox"/> Amendment			\$								
<input checked="" type="checkbox"/> Extension of Time		3-11-08	\$ 1050.00								
<input type="checkbox"/> Notice of Appeal/Appeal			\$								
<input type="checkbox"/> Petition			\$								
<input type="checkbox"/> Issue			\$								
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$								
<input type="checkbox"/> Maintenance			\$								
<input type="checkbox"/> Assignment			\$								
<input type="checkbox"/> Other			\$								
		7 TOTAL AMOUNT OF REFUND		1050.00 \$ <u>0.00</u>							
		8 TO BE REFUNDED BY:									
		<input type="checkbox"/> Treasury Check									
		<input checked="" type="checkbox"/> Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">5</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">0</td> <td style="width: 20px;">3</td> <td style="width: 20px;">0</td> </tr> </table>			1	5	--	0	0	3	0
1	5	--	0	0	3	0					
10 REASON:											
<input type="checkbox"/> Overpayment											
<input type="checkbox"/> Duplicate Payment											
<input checked="" type="checkbox"/> No Fee Due (Explanation):											
Maximum extendable time has expired.											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Michelle Eason</u>		TITLE: <u>Paralegal</u> <small>Petitions Examiner</small>									
SIGNATURE: <u>Michelle L. Eason</u>		PHONE: _____									
OFFICE: _____		Office of Petitions									
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>		DATE: <u>6/23/08</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**

Docket No. 1247-0851-6V

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Emmanuel COLIN, et al.

SERIAL NO: 09/498,363

GAU: 1774

FILED: February 4, 2000

EXAMINER: Ferguson, L.

FOR: LAMINATED GLAZING WITH HIGH CRASH TEST RESISTANCE

**REQUEST FOR EXTENSION OF TIME
UNDER 37 C.F.R. 1.136**

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

SIR:

It is hereby requested that a three month extension of time be granted to April 26, 2008 for

- ☐ filing a response to the Official Action dated: February 26, 2008.
- ☐ responding to the requirements in the Notice of Allowability dated:
- ☐ filing the Formal Drawings. The Issue Fee due has been timely filed.
- ☐ responding to the Notice to File Missing Parts of Application dated:
- ☒ filing a Notice of Appeal.
- ☐ filing an Appeal Brief. A Notice of Appeal was filed on:
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown below is reduced by one-half.

The required fee of \$1,050.00 is being made by credit card payment and any further charges may be made against the Attorney of Record's Deposit Account No. 15-0030.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.



Gregory J. Maier

Registration No. 25,599

Refund Ref: 06/23/2008
Credit Card: 0030057474
Customer Number: 22850
Tel. (703) 413-3800
Fax. (703) 413-3220
(OSM) (N 05/03)
A/E Exp.: 06/23/2008
Total: \$1050.00
A/E Exp.: 06/23/2008

Robert T. Pous
Registration No. 0329198008
Adjustment date: 06/23/2008 CKHLOK
INTEFSW 00006010 09498363
02 FC:1253
-1050.00 OP